U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

·	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Sidney Goehri Jr.	Name Cement Masons Union Local #527		
	Labor Organization File Number 011-759		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 18520 Wild Horse Creek Road	Street 3341 Hollenberg Drive		
City Chesterfield	City Bridgeton		
State Missouri ZIP Code + 4 63005	State Missouri ZIP Code + 4 63044		
5. Position in labor organization. Business Representative			
Enter appropriate data below If, during the past fiscal year, you or your sp (except as specified in the exc	ouse or minor child directly or indirectly had any of the following interests lusions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, o monetary value from an employer whose employees your organiza	r derived income or other economic benefit of tion represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name N / A	N/A		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
The second secon	7.b. Amount.		
Street			
City			
State ZIP Code + 4			
Sig	nature		
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompar undersigned's knowledge, and belief, true, correct, and complete. (See the s	nying documents), has been examined by the signatory and is, to the best of the		
andersigned 5 knowledge and belief, true, conject, and complete. (See the s	ection on penalties in the instructions.)		
Signed	On 7-/9-05 314-739-1129		
	Date Telephone Number		

Name of Person Filing Sidney Goehri Jr.		File Number U-
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is activity (2) any part of which consists of buying from or selling or leasing directly or incidealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise	ss
8. Name and address of Business (including trade name, if any). Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	9. Business deals with: a. Labor Organiza b. Trust c. Employer	ation
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ing.
Name N / A Trade Name, if any: P.O. Box, Bldg., Room No., if any	N / A	
Street	11.b. Approximate dollar valu	ue of such dealing. \$0
City	12.a. Nature of interest held	\$60000000000000000000000000000000000000
State	N / A	
	12.b. Amount.	\$0
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Group Health Plan	or other thing of value. 14.a. Nature of payment. 4/5/2004 1 Party Room St	.Louis Cardinal Baseball Ticket
P.O. Box, Bldg., Room No., if any Suite 400 Street 111 Corporate Office Drive	and Food	
City Earth City State Missouri ZIP Code + 4 63045		

Name of Person Filing	Sidney	Goehri	Jr
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File Number U-

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to	an employer any
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.	t geraking ngawa and dagan and dagan dagan dagan ang dagan ang dagan ang dagan ang dagan an ang dagan ang dagan
Name Group Health Plan	5/20/2004	Achieve of Magnetic
Trade Name, if any:	Golf - Greens Fees and Food	Hardware Control of the Control of t
P.O. Box, Bldg., Room No., if any		acident resource (see a see a se
Street 111 Corporate Valley Drive		Dammor Halla account
City Earth City		West of the second seco
State Missouri ZIP Code + 4 63045		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	\$85
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to	an employer any
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name SEI Investments	4/19/2004	
Trade Name, if any:	Golf - Greens Fees, Food and Ap	parel
P.O. Box, Bldg., Room No., if any		
Street One Freedom Valley Drive		
City Caks		
State Pennsylvania ZIP Code + 4 19456		
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment.	\$175
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to	an employer any
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.	***************************************
Name The Commerce Trust Company	4/28/2004	ULTRALIBATION
Trade Name, if any:	1 Club Room St.Louis Cardinal E Food and Plaque	Baseball Ticket,
P.O. Box, Bldg., Room No., if any		
Street 8000 Forsyth Boulevard		
City St.Louis		
State Missouri ZIP Code + 4 63105		encinativitationetareetanaministarioaniasississississississississississississi
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	\$109

Name of Person Filing Sidney Goehri Jr. File Number U-	

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any	
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.	
Name The Commerce Trust Company	6/5/2004	Merchanis (so
Trade Name, if any:	Golf- Greens Fees	Not constitute that the
P.O. Box, Bldg., Room No., if any		districtions
Street 8000 Forsyth Boulevard		and the second
City St. Louis		Charles of the state of the sta
State Missouri ZIP Code + 4 63105		upayani.
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	80
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	······································
Name		W/WWWW
Trade Name, if any:		coccostrate and the second
P.O. Box, Bldg., Room No., if any		
Street		***************************************
City		***************************************
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment,	
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	VANOTS
Name		
Trade Name, if any:		was commonweal and a second
P.O. Box, Bldg., Room No., if any		del sales estate de la constanta de la constan
Street		**************************************
City		OWNERS OF THE PROPERTY OF THE
State ZIP Code + 4		- Consession
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	PACAMAN

6.00